## FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

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COMMITTEE NAME (Must be same as on Statement of Organiz	FC	ORM I		
Citizens for Johnson	R-2	DISCLOSURE		
IMPORTANT: Indicate by # type of committee you are reporting for:  (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) \$  (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (9) City PAC (10) School Box 11) Local Ballot Issue	7. 12/2009)  Office Use On m. #	REPORT  V 625		
CANDIDATE COMMITTEES ONLY:	Political Party (if applicable)	Logg	ed In	
Candidate Name Merle O Johnson	Democrat			
	District (if Senate or House)			
Office Sought State Senate	35			
ate reports are subject to possible civil and criminal penalties. Pursuandidate's committee, and the chairperson, for any other type of cor	uant to lowa Code sections 68B.32A( mmittee, is the individual responsible	7) and 68A.4 for filing time	101(3), the ca ely and accur	ndidate, for a ate reports.
Laborat & Shalamat	515-964-8118	,	7181	1 (
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATES	IGNED
	DEPORT FOR (4) ELECTION	//2\NON EI	ECTION VE	AR
I AM FILING A	REPORT FOR (1) ELECTION Indicate by:	/(Z)NUN-EI	LECTION 1	LAIN.
(report date)				
□CHECK IF AMENDMENT TO REPORT DATED		Local Comm	ittees, enter D	ate of Election
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  (You must continue to file reports until a DR-3 is filed.)			ocal Committees, enter County in tion is held	
STATEMENT OF CASH ON HAND				
cash on hand at the beginning of the reporting period. (Total committee. This amount MUST be the same as the confidence of the last reporting period or must be zero if this is first	ash on hand at the end	\$	1,718.87	
ADD TOTAL MONEY TAKEN IN THIS PERIOD			0.00	
Schedule A: Cash Contributions total (Attach Schedu	le A) (*also see in-kind below)		0.00	
Schedule F: Loans Received total (Attach Schedule I	=)		0.00	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)				
(Schedule H applies to Candidates' Comm	nittees Only)		1,718.87	
	SUB-TOTAL	\$	1,/10.0/	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			1,718.87	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)				
Schedule F: Loan Repayments total (Attach Schedul	e F)		0.00	
CASH ON HAND at the end of this reporting period (if final rep	ort balance must be zero)	\$	0.00	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	0.00	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched	iule E)	\$	0.00	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule	0.00			
CONSULTANT BREAKDOWN (Schedule G Attached?)	_YES _	_ <b>NO</b>		
CANDIDATE COMMITTEES ONLY:	0.00			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Atta	\$	0.00		

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES			
CHECK THIS BOX IF AMENDING FORM				

Citizens fo	or Johnson			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
01-13-11	ID# CK#	Polk County Democratic Central Committee- 5661 Fleur Dr. Des Moines, Iowa 50321	Donation	\$ 1718.87
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTA	L \$

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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\$ 1718.87

TOTAL (if last page of this schedule)